

UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL
PARK SERVICE
PERIODIC CONCESSION EVALUATION REPORT
(Merchandising Operations) – Standard No. V

FORM 10-605 (Rev. 6/82)

| | | | |
|---------------------|--|-----------------------|--|
| Concid#: | | Name of Concessioner: | |
| Region: | | Facility/Service: | |
| Year of Evaluation: | | | |

NOTICE TO CONCESSIONER: The elements (X) below were found deficient this date and must be corrected by the date(s) specified below. Failure to make correction(s) within the date(s) specified will result in downgrading the initial rating and may result in an unsatisfactory rating which may affect your

ELEMENTS/CLASSIFICATION
Check (Box) in space provided - applicable elements (APP.)
Check (Box) in space provided - those which are deficient (DEF.)

| Element A. FACILITY EXTERIOR | | APP. | DEF. | Element D. RATES | | APP. | DEF. |
|---------------------------------|--------------------------------------|------|------|----------------------------|--|---------------------------|------------------------|
| 1. | Structure Condition (B) | | | 13. | Auth. Rates & Labeling (A) | | |
| 2. | Grounds (B) | | | 14. | Sales Verification (C) | | |
| 3. | Public Signs (C) | | | Element E. MERCHANDISE | | APP. | DEF. |
| 4. | Garbage and Trash (A) | | | 15. | Genuine Native & American Indian Handcraft (A) | | |
| Element B. FACILITY INTERIOR | | APP. | DEF. | 16. | Other Preferred Mechandise (B) | | |
| 5. | Public Restrooms (A) | | | 17. | Other Acceptable Merchandise (B) | | |
| 6. | Public Signs (C) | | | 18. | Unacceptable Merchadise (A) | | |
| 7. | Display/Sales & Other Areas (B) | | | Element F. OTHER | | APP. | DEF. |
| Element C. OPERATIONAL | | APP. | DEF. | 19. | Vending (B) | | |
| 8. | Employee Performance (A) | | | 20. | Beverage Container Guidelines (B) | | |
| 9. | Employee Attitude (A) | | | | | | |
| 10. | Employee Appearance (A) | | | | | | |
| 11. | Operating Hours (B) | | | | | | |
| 12. | Staffing (A) | | | | | | |
| ITEM # | EVALUATION OBSERVATION | | | | | CORRECTED BY (Date) | CORRECTED BY (Date) |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| EVALUATION DATE | # OF OBSERVATIONS BY CLASSIFICATIONS | | | NUMERIC PERIODIC RATING | NPS EVALUATOR SIGNATURE | CONCESSIONER SIGNATURE | |
| INITIAL | A | B | C | Preliminary | | | |
| FOLLOW-UP | | | | Final | | | |
| REMARKS : | | | | | | | |